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| United States Bankruptcy Court District of   |  |                           |  |                                |                |                     |  | _               |                   | Volu                        | intary Petition   |                               |   |
|--|--|---------------------------|--|--------------------------------|----------------|---------------------|--|-----------------|-------------------|-----------------------------|---|-------------------------------|---|
| Name of Debto  | or (if individ   | lual, enter La            | st, First, Middle)   | :                              |                | N                   | Name of  | Joint D         | ebtor (Spo        | ouse) (Last, Fi             | irst, Midd  | le):                          |   |
|  | All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): |                           |  |                                |                |                     | All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):   |                 |                   |                             |   |                               |   |
| Last four digits than one, state all   |  | c./Complete l             | EIN or other Tax   | I.D. No. (if 1                 | nore           |                     | Last four  |                 | of Soc. Sec       | c./Complete I               | EIN or oth  | er Tax I.D.                   | No. (if more than   |
| Street Address of Debtor (No. & Street, City, and State):  |  |                           |  |                                |                | S                   | treet Ad   | dress of        | Joint Deb         | otor (No. & St              | reet, City  | , and State)                  | :   |
|  |  |                           |  | ZIPCODI                        | E              |                     | 7  | CD :1           |                   | d. D 1                      | DI C  |                               | ZIPCODE   |
| County of Resi   | idence or of   | the Principal             | l Place of Busine  | ss:                            |                |                     | County o   | f Reside        | ence or of        | the Principal               | Place of  | Business:                     |   |
| Mailing Addres   | ss of Debtor   | (if different             | from street addre  | ess):                          |                | N                   | Mailing A  | Address         | of Joint D        | Debtor (if diffe            | erent from  | n street addr                 | ress):  |
|  |  |                           |  | ZIPCOD                         | Е              |                     |  |                 |                   |                             |   |                               | ZIPCODE   |
| Location of Pri  | incipal Asse   | ts of Busines             | s Debtor (if diffe   | erent from str                 | eet addres     | ss abo              | ove):  |                 |                   |                             |   |                               | ZIDCODE   |
| Town of Dobas  | - Æ 60   |                           | 1  | 47. 1                          |                |                     |  | <i>~</i> 1      | 4.0               |                             |   |                               | ZIPCODE   |
| Type of Debtor<br>(Chec  | ck <b>one</b> box.)  | ganization)               | 1  | re of Busines II applicable bo |                |                     |  | _               |                   | kruptcy Cod<br>is Filed (Ch |   |                               |   |
| Partnership Other (If debt entities, check   | (includes LLC  | and LLP) of the above     | ☐ Health Care B☐ Single Asset R☐ 11 U.S.C. § 10☐ Railroad☐ Stockbroker | eal Estate as de               | efined in      |                     | _  | apter 7 apter 9 |                   | Chapter 11<br>Chapter 12    |   | f a Foreign M<br>Chapter 15 P | Petition for Recognition<br>fain Proceeding<br>Petition for Recognition<br>formain Proceeding |
| State type of  | •  |                           | ☐ Commodity B☐ Clearing Bank   |                                |                |                     | Nature of Debts (Check one box)  |                 |                   |                             |   |                               |   |
|  |  |                           | Nonprofit Org  |                                | fied under     | L                   | ☐ Consumer/Non-Business ☐ Business   |                 |                   |                             |   |                               |   |
| Filing Fee (Check one box)  Full Filing Fee attached  Filing Fee to be paid in installments (Applicable to individuals only)  Must attach signed application for the court's consideration certifying that the debtor is |  |                           |  |                                | Debt Check i   | tor is a stor is no | small busing the armall busing the armall busing the armall business and the armall business are gregate non the armall business are are armall business are are are armall business are | ousiness debto  | s defined i       | ned in 11 U.                | . § 101(51D).<br>S.C. § 101(51D).<br>to non-insiders or |                               |   |
| Statistical/Ad   | lministrativ   | e Informatio              | on   |                                |                |                     |  |                 |                   |                             |   | THIS SPACE                    | E IS FOR COURT USE ONLY   |
| Debtor est   |  | fter any exemp            | ailable for distribut<br>ot property is exclud                         |                                |                |                     | s paid, the  | ere will be     | e no funds a      | vailable for                |   |                               |   |
| Estimated Nur<br>Creditors   | mber of 1- 49  | 50-<br>99                 | 100-<br>199  | 999 5                          | ,000-<br>i,000 | 5,001<br>10,00      | 00 2:  | 0,001-<br>5,000 | 25,001-<br>50,000 | 50,001-<br>100,000          | OVER<br>100,000   |                               |   |
| Estimated Ass  | sets<br>50,001 to  | \$100,001 to              | \$500,001 to   | \$1,000,00                     | 1 to \$10      | 0 000               | ,001 to  | \$50.00         | 0,001 to          | More than                   |   |                               |   |
| \$50,000 \$  | \$100,000  | \$500,000                 | \$1 million  | \$10 milli                     |                | 550 mi              | illion   |                 | million           | \$100 million               | 1   |                               |   |
|  |  |                           |  |                                |                |                     | ]  |                 |                   |                             |   |                               |   |
|  | 50,001 to<br>100,000   | \$100,001 to<br>\$500,000 | \$500,001 to<br>\$1 million  | \$1,000,00<br>\$10 milli       |                | 0,000,<br>550 mi    |  | . ,             | 00,001 to million | More than \$100 millio      |   |                               |   |

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| Voluntary Petit  | ion  | Name of Debtor(s):  |  |  |  |  |  |
|--|--|---|--|--|--|--|--|
| (This page mus   | t be completed and filed in every case)  |   |  |  |  |  |  |
|  | Prior Bankruptcy Case Filed Within Last 8 Years  |   | D ( F'' 1  |  |  |  |  |
| Location<br>Where Filed:                               |  | Case Number:  | Date Filed:  |  |  |  |  |
|  | ankruptcy Case Filed by any Spouse, Partner or Affilia   | 1   |  |  |  |  |  |
| Name of Debtor:  |  | Case Number:  | Date Filed:  |  |  |  |  |
| District:  |  | Relationship:   | Judge:   |  |  |  |  |
|  | Exhibit A  | Exhi  | bit B  |  |  |  |  |
| 10K and 10Q) v<br>Section 13 or 15<br>relief under cha |  | I, the attorney for the petitioner named in the the petitioner that [he or she] may proceed u States Code, and have explained the relief a                                | (To be completed if debtor is an individual whose debts are primarily consumer debts.)  I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter.  I further certify that I delivered to the debtor the notice required by § 342(b) of the |  |  |  |  |
| ☐ Exhibit A  | is attached and made a part of this petition.  | X   |  |  |  |  |  |
|  | 7.7.7.2  | Signature of Attorney for Debtor(s)   |  |  |  |  |  |
|  | Exhibit C  |   | ning Debt Counseling   |  |  |  |  |
|  | r own or have possession of any property that poses or is a threat of imminent and identifiable harm to public healt   | \$  | /Joint Debtor(s) d credit counseling during the 180-day period   |  |  |  |  |
| Yes, and I   | Exhibit C is attached and made a part of this petition.  | ☐ I/we request a waiver of the requirement to obtain budget and credit counseling prior to filing based on exigent circumstances. (Must attach certification describing.) |  |  |  |  |  |
|  | Information Regarding the De   | l<br>btor (Check the Applicable Boxes)  |  |  |  |  |  |
|  | Venue (Check   | any applicable box)   |  |  |  |  |  |
|  | Debtor has been domiciled or has had a residence, princidays immediately preceding the date of this petition or to   |   |  |  |  |  |  |
|  | There is a bankruptcy case concerning debtor's affiliate,  | general partner, or partnership pending in this   | District.  |  |  |  |  |
|  | Debtor is a debtor in a foreign proceeding and has its States in this District, or has no principal place of busine or proceeding [in a federal or state court] in this District relief sought in this District. | ss or assets in the United States but is a defenda  | nt in an action  |  |  |  |  |
|  |  | es as a Tenant of Residential Proper  | rty  |  |  |  |  |
|  | Landlord has a judgment against the debtor for possessi following.)  | on of debtor's residence. (If box checked, comp   | plete the  |  |  |  |  |
|  | (Name o  | f landlord that obtained judgment)  |  |  |  |  |  |
|  | (Addres  | s of landlord)  |  |  |  |  |  |
|  | Debtor claims that under applicable nonbankruptcy law<br>permitted to cure the entire monetary default that gave<br>possession was entered, and  |   |  |  |  |  |  |
|  | Debtor has included in this petition the deposit with the period after the filing of the petition.   | e court of any rent that would become due duri  | ing the 30-day   |  |  |  |  |
|  |  |   |  |  |  |  |  |

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|--|--|---|
| Voluntary Petition   | Document   | Name of Debtor(s):  |
| (This page must be completed and filed in every case)  |  |   |
|  | Signa  | atures  |
| Signature(s) of Debtor(s) (Individual/Joi  | nt)  | Signature of a Foreign Representative   |
| I declare under penalty of perjury that the information provisitude and correct.  [If petitioner is an individual whose debts are primarily conchosen to file under chapter 7] I am aware that I may proced 11, 12 or 13 of title 11, United States Code, understand the reach such chapter, and choose to proceed under chapter 7.  [If no attorney represents me and no bankruptcy petition petition] I have obtained and read the notice required bankruptcy Code.  I request relief in accordance with the chapter of title 11, 1 specified in this petition.  X  Signature of Debtor  X  Signature of Joint Debtor  Telephone Number (If not represented by attorney) | asumer debts and has<br>eed under chapter 7,<br>elief available under<br>in preparer signs the<br>by § 342(b) of the | I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.  (Check only one box.)  I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by § 1515 of title 11 are attached.  Pursuant to § 1511 of title 11, United States Code, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.  X  (Signature of Foreign Representative)  Date   |
| Duit C   |  |   |
| X Signature of Attorney for Debtor(s)  Printed Name of Attorney for Debtor(s)  Firm Name Address   |  | Signature of Non-Attorney Bankruptcy Petition Preparer  I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section.Official Form 19B is attached.  Printed Name and title, if any, of Bankruptcy Petition Preparer |
| Telephone Number  Date   |  | Social Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)   |
| Signature of Debtor (Corporation/Partners  | ship)  | Address   |
| I declare under penalty of perjury that the information provisitrue and correct, and that I have been authorized to file the of the debtor.  The debtor requests relief in accordance with the chapter States Code, specified in this petition.  | vided in this petition<br>his petition on behalf   | X   |
| X Signature of Authorized Individual Printed Name of Authorized Individual   |  | Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.  Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:   |
| Title of Authorized Individual   |  | If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.   |
| Date   |  | A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result infines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.   |

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Official Form 1, Exhibit D (10/06)

#### UNITED STATES BANKRUPTCY COURT

|           | District of |
|-----------|-------------|
| In re     | Case No.    |
| Debtor(s) | (if known)  |
|           |             |

## EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- □ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.

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## Official Form 1, Exh. D (10/06) – Cont.

| □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.]  |
|--|
| If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed. |
| □ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.] □ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.); □ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.); □ Active military duty in a military combat zone.   |
| $\Box$ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.   |
| I certify under penalty of perjury that the information provided above is true and correct.  |
| Signature of Debtor:   |
| Date:  |

# Form B6A (10/05) Case 07-70606 Doc 1 Filed 03/19/07 Entered 03/19/07 14:24:20 Desc Main Document Page 6 of 18

| In re  |   | Case No.   |
|--------|---|------------|
| Debtor | , | (If known) |

#### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| DESCRIPTION AND<br>LOCATION OF<br>PROPERTY | NATURE OF DEBTOR'S<br>INTEREST IN PROPERTY | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION | AMOUNT OF<br>SECURED<br>CLAIM |
|--|--|---------------------------------------|--|-------------------------------|
|  |  |                                       |  |                               |
|  |  |                                       |  |                               |
|  |  |                                       |  |                               |
|  |  |                                       |  |                               |
|  | To   | al <b>&gt;</b>                        |  |                               |

(Report also on Summary of Schedules.)

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|---------------------|---------------|-------|---|-----------|
|                     |               |       |   |           |

| In re  | <b>,</b>      | Case No.   |  |
|--------|---------------|------------|--|
| Debtor | <del></del> , | (If known) |  |

#### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." In providing the information requested in this schedule, do not include the name or address of a minor child. Simply state "a minor child."

| TYPE OF PROPERTY  | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION<br>OF PROPERTY | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | CURRENT VALUE OF<br>DEBTOR'S INTEREST<br>IN PROPERTY, WITH-<br>OUT DEDUCTING ANY<br>SECURED CLAIM<br>OR EXEMPTION |
|---|------------------|---|---------------------------------------|---|
| 1. Cash on hand.  |                  |   |                                       |   |
| 2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.                                    |                  |   |                                       |   |
| 3. Security deposits with public utilities, telephone companies, landlords, and others.   |                  |   |                                       |   |
| 4. Household goods and furnishings, including audio, video, and computer equipment.   |                  |   |                                       |   |
| 5. Books; pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.   |                  |   |                                       |   |
| 6. Wearing apparel.   |                  |   |                                       |   |
| 7. Furs and jewelry.  |                  |   |                                       |   |
| 8. Firearms and sports, photographic, and other hobby equipment.  |                  |   |                                       |   |
| 9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.  |                  |   |                                       |   |
| 10. Annuities. Itemize and name each issuer.  |                  |   |                                       |   |
| 11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c); Rule 1007(b)). |                  |   |                                       |   |

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| In re |        | , | Case No. |            |
|-------|--------|---|----------|------------|
|       | Debtor |   |          | (If known) |

## **SCHEDULE B - PERSONAL PROPERTY**

| TYPE OF PROPERTY   | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION<br>OF PROPERTY | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|--|------------------|---|---------------------------------------|--|
| 12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.  |                  |   |                                       |  |
| 13. Stock and interests in incorporated and unincorporated businesses. Itemize.  |                  |   |                                       |  |
| 14. Interests in partnerships or joint ventures. Itemize.  |                  |   |                                       |  |
| 15. Government and corporate bonds and other negotiable and non-negotiable instruments.  |                  |   |                                       |  |
| 16. Accounts receivable.   |                  |   |                                       |  |
| 17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.   |                  |   |                                       |  |
| 18. Other liquidated debts owed to debtor including tax refunds. Give particulars.   |                  |   |                                       |  |
| 19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A – Real Property.       |                  |   |                                       |  |
| 20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.   |                  |   |                                       |  |
| 21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. |                  |   |                                       |  |

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| In re, | Case No    |
|--------|------------|
| Debtor | (If known) |

# SCHEDULE B -PERSONAL PROPERTY (Continuation Sheet)

| TYPE OF PROPERTY  | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION<br>OF PROPERTY | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | CURRENT VALUE OF<br>DEBTOR'S INTEREST<br>IN PROPERTY, WITH-<br>OUT DEDUCTING ANY<br>SECURED CLAIM<br>OR EXEMPTION |
|---|------------------|---|---------------------------------------|---|
| 22. Patents, copyrights, and other intellectual property. Give particulars.   |                  |   |                                       |   |
| 23. Licenses, franchises, and other general intangibles. Give particulars.  |                  |   |                                       |   |
| 24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. |                  |   |                                       |   |
| 25. Automobiles, trucks, trailers, and other vehicles and accessories.  |                  |   |                                       |   |
| 26. Boats, motors, and accessories.   |                  |   |                                       |   |
| 27. Aircraft and accessories.   |                  |   |                                       |   |
| 28. Office equipment, furnishings, and supplies.  |                  |   |                                       |   |
| 29. Machinery, fixtures, equipment, and supplies used in business.  |                  |   |                                       |   |
| 30. Inventory.  |                  |   |                                       |   |
| 31. Animals.  |                  |   |                                       |   |
| 32. Crops - growing or harvested.<br>Give particulars.  |                  |   |                                       |   |
| 33. Farming equipment and implements.   |                  |   |                                       |   |
| 34. Farm supplies, chemicals, and feed.   |                  |   |                                       |   |
| 35. Other personal property of any kind not already listed. Itemize.  |                  |   |                                       |   |
|   |                  | continuation sheets attached Tot        | al 🗲                                  | \$  |

| reDebtor   | ,  | Case No                                    | (If known)  |  |  |  |  |  |  |  |  |
|--|--|--|---|--|--|--|--|--|--|--|--|
| SCHEDULE C - PROPERTY CLAIMED AS EXEMPT  |  |  |   |  |  |  |  |  |  |  |  |
| Debtor claims the exemptions to whic (Check one box)  ☐ 11 U.S.C. § 522(b)(2)  ☐ 11 U.S.C. § 522(b)(3) | th debtor is entitled under:               | ☐ Check if debtor claims a home \$125,000. | stead exemption that exceeds                          |  |  |  |  |  |  |  |  |
| DESCRIPTION OF PROPERTY  | SPECIFY LAW<br>PROVIDING EACH<br>EXEMPTION | VALUE OF<br>CLAIMED<br>EXEMPTION           | CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION |  |  |  |  |  |  |  |  |
|  |  |  |   |  |  |  |  |  |  |  |  |
|  |  |  |   |  |  |  |  |  |  |  |  |
|  |  |  |   |  |  |  |  |  |  |  |  |
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Form B6C (10/05)

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| (10/05) | In re |        | , | Case No |            | _ |
|---------|-------|--------|---|---------|------------|---|
| ` /     |       | Debtor |   |         | (If known) |   |

#### SCHEDULE D – CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND A ACCOUNT NUMBER (See Instructions Above) | CODEBTOR | HUSBAND, WIFE,<br>JOINT, OR<br>COMMUNITY | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM<br>WITHOUT<br>DEDUCTING VALUE<br>OF COLLATERAL | UNSECURED<br>PORTION, IF<br>ANY |
|--|----------|--|--|------------|--------------|----------|--|---------------------------------|
| ACCOUNT NO.  |          |  |  |            |              |          |  |                                 |
|  |          |  |  |            |              |          |  |                                 |
|  |          |  |  |            |              |          |  |                                 |
|  |          |  |  |            |              |          |  |                                 |
|  |          |  | VALUE \$   | <u> </u>   |              |          |  |                                 |
| ACCOUNT NO.  |          |  |  |            |              |          |  |                                 |
|  |          |  |  |            |              |          |  |                                 |
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|  |          |  |  |            |              |          |  |                                 |
|  |          |  | VALUE \$   |            |              |          |  |                                 |
| ACCOUNT NO.  |          |  |  |            |              |          |  |                                 |
|  |          |  |  |            |              |          |  |                                 |
|  |          |  |  |            |              |          |  |                                 |
|  |          |  |  |            |              |          |  |                                 |
| + GGOVINITA NO   |          |  | VALUE \$   |            |              |          |  |                                 |
| ACCOUNT NO.  |          |  |  |            |              |          |  |                                 |
|  |          |  |  |            |              |          |  |                                 |
|  |          |  |  |            |              |          |  |                                 |
|  |          |  |  |            |              |          |  |                                 |
|  |          |  | VALUE \$   |            |              |          |  |                                 |
| continuation sheets attached   |          |  | Subtotal ►<br>(Total of this page)   |            |              |          | \$   |                                 |
| anaciicu   |          |  | Total ►  |            |              |          | \$   |                                 |
|  |          |  | (Use only on last page)  |            |              |          | Ψ  |                                 |

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Form B6E (10/05)

| In re |        | ,           | Case No.   |
|-------|--------|-------------|------------|
| -     | Debtor | <del></del> | (if known) |

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H,""W,""J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. If applicable, also report this total on the Means Test form.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

Domestic Support Obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

#### Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

#### ☐ Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,000\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

#### ☐ Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

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Form B6E Contd. (10/05)

| In re,  | Case No  |
|---|--|
| Debtor  | (if known)   |
| Certain farmers and fishermen   |  |
| Claims of certain farmers and fishermen, up to \$4,925* per farmers   | mer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).  |
| ☐ Deposits by individuals   |  |
| Claims of individuals up to \$2,225* for deposits for the purcha that were not delivered or provided. 11 U.S.C. § 507(a)(7).    | ise, lease, or rental of property or services for personal, family, or household use,  |
| Taxes and Certain Other Debts Owed to Governmental U  | U <b>nits</b>  |
| Taxes, customs duties, and penalties owing to federal, state, an  | d local governmental units as set forth in 11 U.S.C. § 507(a)(8).  |
| Commitments to Maintain the Capital of an Insured Dep   | ository Institution  |
|   | the Office of Thrift Supervision, Comptroller of the Currency, or Board of or successors, to maintain the capital of an insured depository institution. 11 |
| Claims for Death or Personal Injury While Debtor Was I  | Intoxicated  |
| Claims for death or personal injury resulting from the operation alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10). | n of a motor vehicle or vessel while the debtor was intoxicated from using   |
|   |  |
| * Amounts are subject to adjustment on April 1, 2007, and every adjustment.   | three years thereafter with respect to cases commenced on or after the date of   |
|   |  |
|   |  |
|   |  |
|   |  |
| C   | continuation sheets attached   |

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Form B6E - Cont. (10/05)

| In re  |   | Case No. |            |
|--------|---|----------|------------|
| Debtor | , |          | (If known) |

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

TYPE OF PRIORITY

| THE OF INIONITI   |          |  |   |                            |               |                     |                       |                                   |
|---|----------|--|---|----------------------------|---------------|---------------------|-----------------------|-----------------------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | CODEBTOR | HUSBAND, WIFE,<br>JOINT, OR<br>COMMUNITY | DATE CLAIM WAS INCURRED<br>AND CONSIDERATION FOR<br>CLAIM               | CONTINGENT                 | UNLIQUIDATED  | DISPUTED            | AMOUNT<br>OF<br>CLAIM | AMOUNT<br>ENTITLED TO<br>PRIORITY |
| Account No.   | -        |  |   |                            |               |                     |                       |                                   |
| Account No.   |          |  |   |                            |               |                     |                       |                                   |
| Account No.   | -        |  |   |                            |               |                     |                       |                                   |
| Account No.   |          |  |   |                            |               |                     |                       |                                   |
| Account No.   |          |  |   |                            |               |                     |                       |                                   |
| Sheet no of sheets attached to Schedule   | e of Cre | ditors                                   |   | S                          | ubtota        | ı>                  | \$                    | \$                                |
| Holding Priority Claims   |          |  | (To  (Use only on last page of the comple  (Report total also on Summar | tal of<br>ted Sc<br>y of S | Tota<br>hedul | ıl <b>≻</b><br>e E. | \$                    | \$                                |

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| Official Politi of (10/08)   |       | Document       | Page 15 of 18             |           |
| In re                        |       |                | Case No.                  |           |
| Debtor                       |       |                | (if kno                   | wn)       |

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts filing a case under chapter 7, report this total also on the Statistical Summary of Certain Liabilities and Related Data..

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F. HUSBAND, WIFE, JOINT, OR COMMUNITY JNLIQUIDATED AMOUNT OF CREDITOR'S NAME, DATE CLAIM WAS CONTINGENT CODEBTOR **DISPUTED** MAILING ADDRESS INCURRED AND **CLAIM** INCLUDING ZIP CODE, CONSIDERATION FOR AND ACCOUNT NUMBER CLAIM. (See instructions above.) IF CLAIM IS SUBJECT TO SETOFF, SO STATE. ACCOUNT NO. ACCOUNT NO. ACCOUNT NO. ACCOUNT NO. Subtotal> continuation sheets attached (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

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| In re |        |   | Case No. |            |
|-------|--------|---|----------|------------|
|       | Debtor | , |          | (if known) |

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)   | CODEBTOR | HUSBAND, WIFE,<br>JOINT, OR<br>COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF<br>CLAIM |
|---|----------|--|---|------------|--------------|----------|--------------------|
| ACCOUNT NO.   |          |  |   |            |              |          |                    |
|   |          |  |   |            |              |          |                    |
| ACCOUNT NO.   |          |  |   |            |              |          |                    |
|   |          |  |   |            |              |          |                    |
| ACCOUNT NO.   |          |  |   |            |              |          |                    |
|   |          |  |   |            |              |          |                    |
| ACCOUNT NO.   |          |  |   |            |              |          |                    |
|   |          |  |   |            |              |          |                    |
| ACCOUNT NO.   |          |  |   |            |              |          |                    |
|   |          |  |   |            |              |          |                    |
| Sheet noofcontinuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims  |          |  |   |            |              |          |                    |
| Total ➤  (Use only on last page of the completed Schedule F.)  (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.) |          |  |   |            |              |          | \$                 |

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| In re  | , | Case No. |            |
|--------|---|----------|------------|
| Debtor | • |          | (if known) |

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR   | HUSBAND, WIFE,<br>JOINT, OR<br>COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.         | CONTINGENT | UNLIQUIDATED          | DISPUTED | AMOUNT OF<br>CLAIM |
|---|------------|--|---|------------|-----------------------|----------|--------------------|
| ACCOUNT NO.   |            |  |   |            |                       |          |                    |
| ACCOUNT NO.   |            |  |   |            |                       |          |                    |
| ACCOUNT NO.   |            |  |   |            |                       |          |                    |
| ACCOUNT NO.   |            |  |   |            |                       |          |                    |
| ACCOUNT NO.   |            |  |   |            |                       |          |                    |
| Sheet noofcontinuation sheets attacto Schedule of Creditors Holding Unsecure                      | ched<br>ed |  |   |            | Sub                   | total➤   | \$                 |
| Nonpriority Claims  |            | (Report                                  | (Use only on last page of the<br>also on Summary of Schedules and, if app<br>Summary of Certain Liabi | licable o  | ed Sched<br>n the Sta | tistical | \$                 |

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| In re |        |   | Case No. |            |
|-------|--------|---|----------|------------|
|       | Debtor | , |          | (if known) |

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

|  |            |  | (Continuation Sheet)  |            |              |                      |                    |
|--|------------|--|---|------------|--------------|----------------------|--------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  | CODEBTOR   | HUSBAND, WIFE,<br>JOINT, OR<br>COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED             | AMOUNT OF<br>CLAIM |
| ACCOUNT NO.  |            |  |   |            |              |                      |                    |
|  |            |  |   |            |              |                      |                    |
| ACCOUNT NO.  | -          |  |   |            |              |                      |                    |
|  |            |  |   |            |              |                      |                    |
| ACCOUNT NO.  |            |  |   |            |              |                      |                    |
| ACCOUNT NO.  |            |  |   |            |              |                      |                    |
|  |            |  |   |            |              |                      |                    |
| ACCOUNT NO.  |            |  |   |            |              |                      |                    |
|  |            |  |   |            |              |                      |                    |
| Sheet noofcontinuation sheets attactor Schedule of Creditors Holding Unsecure  | ched<br>ed |  |   |            | Sub          | total➤               | \$                 |
| Nonpriority Claims  Total➤  (Use only on last page of the completed Schedule F.)  (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.) |            |  |   |            |              | lule F.)<br>tistical | \$                 |